



Benefits at a Glance

Benefit Highlights

- 4 Kaiser Medical Plans to choose from
- HSA, HRA, FSA options
- Dental coverage
- Benefit Year: November 1 – October 31
(HSA, HRA, FSA – calendar year)
- PERS state retirement
- VOYA Financial (457 deferred comp plan)
- Life and AD&D Insurance
- Short & Long Term Disability
- Employee Assistance Program

Kaiser Permanente Plans

Benefits	HMO Plan	PPO Plan
Deductible (Indiv/Family)	\$500/\$1,500	\$500/\$1,500
Out of Pocket Max. (Indiv/Family)	\$2,500/\$7,500	\$2,500/\$7,500
Coinsurance	80/20	80/20
Office Visit	\$15 copay then 0%	\$30 copay (enhanced \$20) then 0%
Lab & X-Ray	20% after ded	20% after ded
Preventive Care	Covered in Full	Covered in Full
Inpatient Hospital	20% after ded	20% after ded
Emergency Room	\$200 copay then 20% after ded	\$200 copay then 20% after ded
Routine Vision Care (Adult)	\$15 copay (1 exam PCY)	Covered in full (1 exam PCY)
Optical Hardware (Adult)	Covered in full up to \$150 per 12 months	Covered in full up to \$150 per 12 months
Prescription Drugs (Retail)	\$20/\$40	\$20/\$45/\$65 (enhanced \$20/\$40/\$60)

Kaiser Permanente Plans

Benefits	HDHP Plan (Current)	HDHP Plan (HMO Network)
Deductible (Indiv/Family)	\$1,500/\$3,000 (Aggregate)	\$1,500/\$3,000 (Aggregate)
Out of Pocket Max. (Indiv/Family)	\$4,500/\$7,350 (Aggregate)	\$4,500/\$8,500 (Aggregate)
Coinsurance	80/20	80/20
Office Visit	20% after ded (enhanced 10% after ded)	20% after ded (enhanced 10% after ded)
Lab & X-Ray	20% after ded	20% after ded
Preventive Care	Covered in Full	Covered in Full
Inpatient Hospital	20% after ded	20% after ded
Emergency Room	\$200 copay then 20% after ded	\$200 copay then 20% after ded
Routine Vision Care (Adult)	Covered in Full (1 exam PCY)	Covered in Full (1 exam PCY)
Optical Hardware (Adult)	Covered in Full up to \$150 per 12 months	Covered in Full up to \$150 per 12 months
Prescription Drugs (Retail)	20% after ded (enhanced 10% after ded) certain preventive meds covered in full for 1 st refill	20% after ded (enhanced 10% after ded) certain preventive meds covered in full for 1 st refill

Kaiser – Helpful Tools

Free preventive care



Annual checkup
Well baby/child care
Immunizations

Website & app



Benefits information
Claims and account
balances
Kp.org/wa

24/7 nurse line



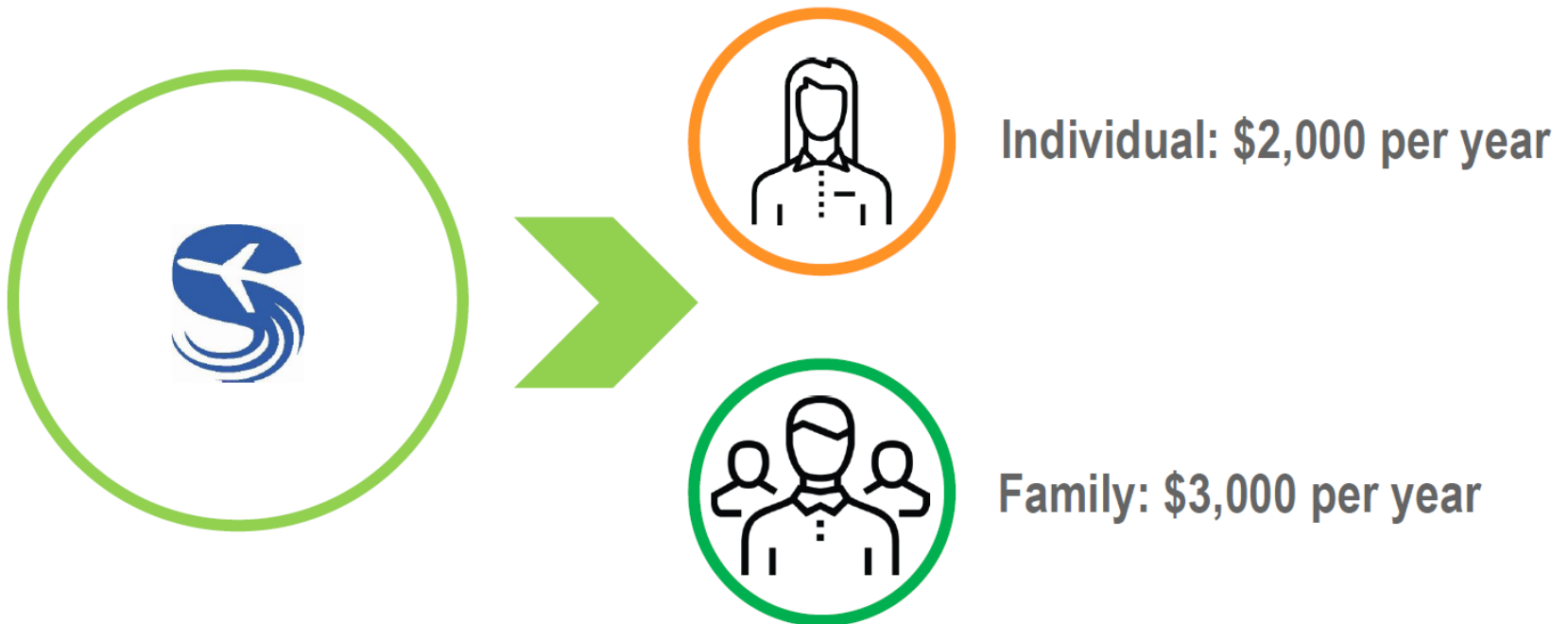
Free advice 24/7
Medical professional
1-800-297-6877

Online Visits

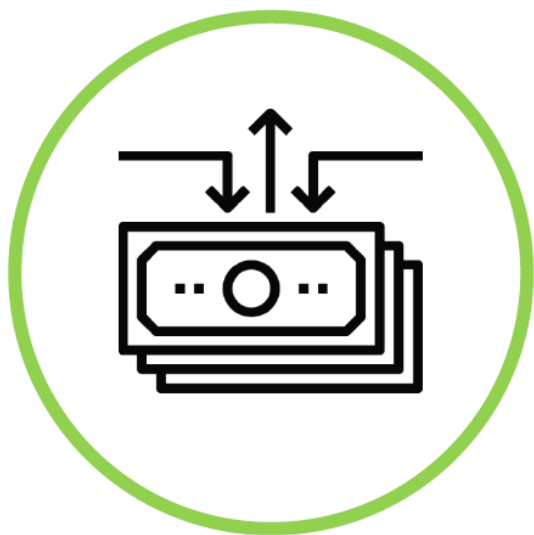


Common ailments
Prescriptions
No appointments
Free
kp.org/wa/onlinevisit

Spokane Airport makes a contribution to your HSA— FREE HEALTHCARE DOLLARS!



You can contribute up to the annual limit



Tax-free payroll deductions



Individual: \$3,500 * per year
(plus \$1,000 if over 55)



Family: \$7,000 * per year
(plus \$1,000 if over 55)

* Limit includes contributions from company

Are you eligible for an HSA?



Must be enrolled in HDHP

May not have a medical flexible spending account (including spouse FSA)

Cannot be claimed as a tax dependent

May not be enrolled in Medicare, Medicaid or Tricare

May not be enrolled in any other non-HDHP

HRA features

**Pay for healthcare expenses with a company-paid
Health Reimbursement Arrangement (HRA)**



**Spokane Airports funds
the HRA if you enroll in the
HMO: \$1,000**



**Spokane Airports funds
the HRA if you enroll in the
PPO: \$400**



**Cover your deductible
expenses—
tax-free!**

HRAs are not portable. If you leave the company, you can't take your balance with you.

Healthcare Flexible Spending Account (FSA)



Administered by
Peak One

FEATURES

- Up to \$2,600 per year
- Pre-tax payroll deductions
- Tax-free withdrawals
- Access entire amount on 1st day of plan year
- Roll over up to \$500 each year
- Must re-elect each year
- **USE IT OR LOSE IT!**

TYPES

STANDARD

- Medical, dental and vision expenses

LIMITED PURPOSE

- For HDHP participants
- Vision and dental only

DEPENDENT CARE

- Can elect up to \$5,000 per year

Dental

- MetLife Dental Plan
- Preventative care covered in full
- \$3,000 annual maximum per year
- Benefits re-set in January



Public Employees Retirement System (PERS)

PERS 2

- defined benefit plan
- monthly benefit based on years of service (service credits) & average final compensation
- retirement age, 65
- guaranteed monthly benefit for rest of your life
- vested after 5 years of service

Formula to calculate monthly benefit:

2% X service credit years X average final compensation = monthly benefit

Public Employees Retirement System (PERS)

PERS 3

- Defined benefit & defined contribution
- Spokane Airports contributes to your defined benefit
- You contribute to defined contribution (investment account – similar to a 401K)
- Retirement age, 65
- Vested after 10 years of service *or* 5 years of service with at least 12 of those months being earned after age 44

Formula to calculate monthly benefit:

1% X service credit years X average final compensation = monthly benefit

Value of defined contribution will consist of your contributions and their investment returns

VOYA Financial



457 Plan offered by VOYA Financial

- tax advantaged deferred compensation retirement plan
- opportunity to put aside pre-tax money for retirement from each paycheck
- annual contribution limit of \$19,000
- catch up contributions - additional \$6,000 per year may be contributed after age 50
- Investment guidance provided by a VOYA Investment Advisor

Voluntary Life and AD&D insurance



**COMPANY
PROVIDES:**
**2x annual
earnings up to
\$250,000**

YOU CAN PURCHASE*

FOR YOURSELF:

Up to 7x earnings to \$300,000

FOR SPOUSE:

Up to 100% of your coverage up to \$150,000

FOR CHILDREN:

Up to \$10,000

* Subject to medical underwriting by Mutual of Omaha

Short & Long Term Disability

- Benefit premiums paid for by Spokane Airports
- **Short Term Disability**
 - Partial income replacement if you are temporarily disabled for 90 days or less
- **Long Term Disability**
 - Partial income replacement if you are disabled and not able to work greater than 90 days

Employee Assistance Program (EAP)



**The Life
Connection
800-280-3782**

STRESS

WORK ISSUES

**FAMILY
RELATIONSHIPS**

SUBSTANCE ABUSE

**AGING
PARENTS**

**FINANCIAL/
LEGAL ISSUES**

- 24-hour telephone assistance
- For everyone in your household
- Up to 8 face-to-face assessment visits
- Online assistance at **bhoptions.com**
 - **Company Code: SIA**